

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

Cabanillas & Associates, P.C
Paola D. Vera, Esq.
120 Bloomingdale RD, Suite 400
White Plains, NY 10605

In Re:

Angel Arriaga

Case No.: 22-13819

Chapter: 13

Adv. No.: _____

Hearing Date: _____

Judge: Papalia/Vincent F.

CERTIFICATION OF SERVICE

1. I, Madelyn Soliman :

☐ represent _____ in this matter.

☒ am the secretary/paralegal for Paola D. Vera, Esq., who represents
Angel Arriaga in this matter.

☐ am the _____ in this case and am representing myself.

2. On 07/26/2022, I sent a copy of the following pleadings and/or documents
to the parties listed in the chart below.

Amended Schedule A/B
Summary of Assets and Liabilities
Declaration about an Individuals Debtor's Schedules

3. I certify under penalty of perjury that the above documents were sent using the mode of service
indicated.

Date: 07/26/2022

/s/Madelyn Soliman
Signature

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
Aargon Agency Inc Attn: Bankruptcy 8668 Spring Mountain Road Las Vegas, NV 89117	Creditor: Collection Attorney	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Account Resolution Services Attn: Bankruptcy Po Box 459079 Sunrise, FL 33345	Creditor: Collection Attorney	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Eos Cca Attn: Bankruptcy P.O. Box 329 Norwell, MA 02061	Creditor: Collection Attorney	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Remex Inc Attn: Bankruptcy Po Box 765 Rocky Hill, NJ 08553	Creditor: Collection Attorney	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
Shellpoint Mortgage Servicing Attn: Bankruptcy Po Box 10826 Greenville, SC 29603	Secured Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Simon's Agency, Inc. Attn: Bankruptcy Po Box 5026 Syracuse, NY 13220	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Sls/equity Attn: Bankruptcy 8742 Lucent Blvd. Highlands Ranch, CO 80129	Secured Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
State of New Jersey Division of Employer Accounts PO BOX 059 Trenton, NJ 08646	Priority Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
TD Bank, N.A. Attn: Bankruptcy 32 Chestnut Street Po Box 1377 Lewiston, ME 04243	Creditor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
Wakefield & Associates Attn: Bankruptcy 7005 Middlebrook Pike Knoxville, TN 37909	Collection Attorney	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Angel Arriaga 820 Plainfield Ave Plainfield, NJ 07060	Debtor	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
Marie Ann Greenberg 302 Bridges Rd # 330 Fairfield, NJ 07004	Trustee	<input type="checkbox"/> Hand-delivered <input checked="" type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)
		<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other _____ (As authorized by the Court or by rule. Cite the rule if applicable.)